Weekly BDDS Meeting for Case Managers and Providers
April 22, 2020

Welcome and Today's Agenda

- Introductions
- DDRS Goals for COVID-19 Efforts
- COVID-19 Planning for Providers
- Updates
- Next Steps

DDRS Goals for COVID-19 Efforts

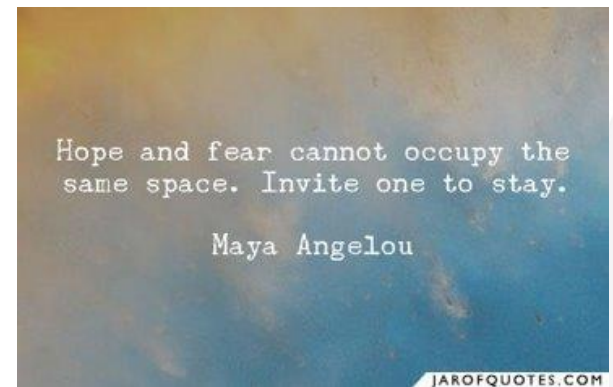**H**elp prevent the spread of COVID-19 and keep people alive

Operationalize flexibilities

Provider network maintained

Empower person-centered decision-making for self-advocates, families, case managers, and providers

Image by: McChrystal Group & NASDDDS

Hope and fear cannot occupy the same space. Invite one to stay.

Maya Angelou

JAROFQUOTES.COM

DDRS Goals for COVID-19 Efforts

- How we, <u>as a system</u>, are working to accomplish these goals
  - Being person-centered and reinforcing person-centered thinking in all that we do
  - Balancing what is Important To and Important For people with disabilities, their families, case managers, and providers – working to develop a sense of normalcy by minimizing change, promoting routine, and encouraging individualized responses.
  - Collecting meaningful data that will help us respond to immediate needs, as well as address future needs
  - Operating within Executive Orders and other relevant regulations
  - Maintaining on-going, active communication with stakeholders
  - Promoting the use of integrated support options that address the holistic needs of individuals and families
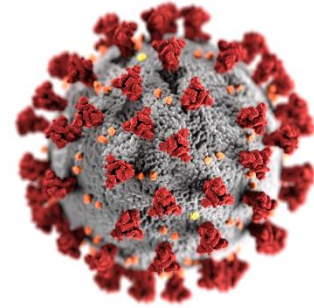
COVID-19 in Congregate Care Settings

(A collaborative effort and informational guide between Jennifer K. Spivey and Deanna R. Paddack)

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Chief Nurse Consultant
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Indiana State
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What is….

- Coronavirus – A (family) of viruses that cause illness and disease

- SARS-CoV-2 The (name) of the virus that causes COVID-19

- COVID-19 – The (illness) caused by the virus

How long is a COVID positive patient infectious for ?

- A recent study based on patients from two hospitals in Wuhan, China, found that surviving COVID-19 patients could be infectious 8 days up to 37 days (median days= 20).

- The study did not look at patients whose illness was mild, so the amount of time they can spread the disease may be different.

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How long is SARS-CoV-2 living on surfaces

- Two recent studies have investigated how long coronaviruses survive on different surfaces. The research looked at a number of different viruses including SARS-CoV-2 – the coronavirus that has caused COVID-19. And it found that the survival times varied according to the type of surfaces.

- The virus survived for longest on stainless steel and plastic – for up to <u>nine days</u>. The shortest survival times of <u>one day</u> was for paper and cardboard.

  - Air 3 hours- So by opening the window, you can remove and disperse the droplets and reduce the amount of virus in the air – which will reduce the risk of infection for others.
  - Cardboard 24 hours
  - Plastic > 72 hours
  - Stainless Steel 48 hours

Resources:
- https://jamanetwork.com/journals/jamanetworkopen/fullarticle/2763473?resultClick=1&utm_source=TrendMD&utm_medium=cpc&utm_campaign=JAMA_Network_Open_TrendMD_1
- file:///K:/Outbreak/AR-HAI%20folder/Infection%20Prevention_JKS/COVID-19%20IP%20Tools/Disinfectants%20and%20Cleaning/surfaces%20virus%20lives%20on%20NEJM.pdf

EPA approved disinfectants for use against SARS-CoV-2

All products on this list meet EPA's criteria for use against SARS-CoV-2, the virus that causes COVID-19. https://www.epa.gov/pesticide-registration/list-n-disinfectants-use-against-sars-cov-2

Finding a Product

- The easiest way to find a product on this list is to enter **the first two sets** of its **EPA registration number** into the search bar For example, if EPA Reg. No. 12345-12 is on List N, you can buy EPA Reg. No. 12345-12-2567 and know you're getting an equivalent product. You can find this number by looking for the EPA Reg. No. on the product label.

Using Other Products

- If you can't find a product on this list to use against SARS-CoV-2, look at a different product's label to confirm it has an EPA registration number and that human coronavirus is listed as a target pathogen.

Follow the Label

- When using an EPA-registered disinfectant, **follow the label directions** for safe, effective use. Make sure to follow the contact time, which is the amount of time the surface should be visibly wet, listed in the table below.

These products are for use on surfaces, not humans.

Clorox ™

EPA Registration Number	Active Ingredient(s)	Product Name	Company	Follow the disinfection directions and preparation for the following virus	Contact Time (in minutes)	Formulation Type	Surface Types for Use
5813-111	Sodium hypochlorite	Clorox Disinfecting Bleach2	The Clorox Company	Canine Parvovirus; Feline Parvovirus	10	Dilutable	Hard nonporous
5813-114	Sodium hypochlorite	Clorox Performance Bleach1	The Clorox Company	Canine Parvovirus; Feline Parvovirus	10	Dilutable	Hard nonporous
67619-32	Sodium hypochlorite	CloroxPro™ Clorox® Germicidal Bleach	Clorox Professional Products Company	Canine Parvovirus; Coxsackievirus B3 Virus; Enterovirus D68; Norovirus; Feline Parvovirus; Hepatitis A Virus; Murine Norovirus; Poliovirus; Rhinovirus	5	Dilutable	Hard nonporous
5813-50	Sodium hypochlorite	Ultra Clorox Brand Regular Bleach	The Clorox Company	Human coronavirus	5	Dilutable	Hard nonporous
56392-7	Sodium hypochlorite	Clorox Healthcare® Bleach Germicidal Cleaner Spray	Clorox Professional Products Company	Canine Parvovirus; Feline Panleukopenia Virus; Hepatitis A Virus; Norovirus; Poliovirus; Rhinovirus	1	RTU	Hard nonporous
5813-105	Sodium hypochlorite	Clorox Multi Surface Cleaner + Bleach	The Clorox Company	Rhinovirus; Canine Parvovirus; Feline Panleukopenia Virus; Norovirus; Poliovirus	1	RTU	Hard nonporous
5813-110	Hydrogen peroxide	Clorox Pet Solutions Advanced	The Clorox Company	Enterovirus D68; Norovirus; Rhinovirus	5	RTU	Hard nonporous

Lysol ™

EPA Registration Number	Active Ingredient(s)	Product Name	Company	Follow the disinfection directions and preparation for the following virus	Contact Time (in minutes	Formulation Type	Surface Types for Use
675-55	Citric acid	Lysol Bathroom Cleaner	Reckitt Benckiser LLC	Poliovirus	5	RTU	Hard nonporous
777-114	Quaternary ammonium	Lysol® Disinfecting Wipes (All Scents)	Reckitt Benckiser	Rotavirus	10	Wipe	Hard nonporous
675-54	Quaternary ammonium	Lysol Brand Heavy Duty Cleaner Disinfectant Concentrate	Reckitt Benckiser LLC	Rotavirus	5	Dilutable	Hard nonporous
777-127	Quaternary ammonium; Ethanol	Lysol® Disinfectant Max Cover Mist	Reckitt Benckiser LLC	Norovirus	10	RTU	Hard nonporous
777-132	Hydrochloric acid	Lysol Brand Power Plus Toilet Bowl Cleaner	Reckitt Benckiser LLC	Poliovirus Type 1	10	RTU	Hard nonporous
777-70	Quaternary ammonium	Lysol Brand Cling & Fresh Toilet Bowl Cleaner	Reckitt Benckiser LLC	Rotavirus	0.5	RTU	Hard nonporous
777-81	Hydrochloric acid	Lysol Brand Lime & Rust Toilet Bowl Cleaner	Reckitt Benckiser LLC	Poliovirus Type 1; Hepatitis A virus	10	RTU	Hard nonporous
777-83	Sodium hypochlorite	Lysol Brand Bleach Mold And Mildew	Reckitt Benckiser LLC	Rhinovirus; Norovirus	0.5	RTU	Hard nonporous

Universal source control updates

- Actively screen everyone for fever and symptoms of COVID-19 before they enter the healthcare facility.

- As community transmission intensifies within a region, healthcare facilities could consider foregoing contact tracing for exposures in a healthcare setting in favor of universal source control for HCP and screening for fever and symptoms before every shift.

- Added links to updated guidance for:
    - Strategies to Optimize the Supply of PPE and other Equipment
    - Interim Guidance for Discontinuation of Transmission-Based Precautions and Disposition of Hospitalized Patients with COVID-19
    - Interim Guidance on Criteria for Return to Work for Healthcare Personnel with Confirmed or Suspected COVID-19.
    - Strategies to Mitigate Staffing Shortages

When Someone is Sick

Bedroom and Bathroom

Keep **separate bedroom and bathroom for a person who is sick** (if possible)

- The person who is sick should stay separated from other people in the home (as much as possible).
- **If you have a separate bedroom and bathroom**: Only clean the area around the person who is sick when needed, such as when the area is soiled. This will help limit your contact with the person who is sick.
  - Caregivers can **provide personal cleaning supplies** to the person who is sick (if appropriate). Supplies include tissues, paper towels, cleaners, and EPA-registered disinfectants ⬈ . If they feel up to it, the person who is sick can clean their own space.
- **If shared bathroom**: The person who is sick should clean and disinfect after each use. If this is not possible, the caregiver should wait as long as possible before cleaning and disinfecting.

When Someone is Sick

Food

- **Stay separated:** The person who is sick should eat (or be fed) in their room if possible.
- **Wash dishes and utensils using gloves and hot water:** Handle any used dishes, cups/glasses, or silverware with gloves. Wash them with soap and hot water or in a dishwasher.
- Clean hands after taking off gloves or handling used items.

Trash

- **Dedicated, lined trash can:** If possible, dedicate a lined trash can for the person who is sick. Use gloves when removing garbage bags, and handling and disposing of trash. Wash hands afterwards.

Discontinuing Isolation

Test-based strategy (simplified from initial protocol) Previous recommendations for a test-based strategy remain applicable; however, a test-based strategy is contingent on the availability of ample testing supplies and laboratory capacity as well as convenient access to testing. For jurisdictions that choose to use a test-based strategy, the recommended protocol has been simplified so that *only one swab is needed at every sampling*.

Persons who have COVID-19 who have symptoms and were directed to care for themselves at home may discontinue isolation under the following conditions:

- Resolution of fever without the use of fever-reducing medications **and**
- Improvement in respiratory symptoms (e.g., cough, shortness of breath) **and**
- Negative results of an FDA Emergency Use Authorized molecular assay for COVID-19 from at least two consecutive nasopharyngeal swab specimens collected ≥24 hours apart*** (total of two negative specimens). See Interim Guidelines for Collecting, Handling, and Testing Clinical Specimens from Persons Under Investigation (PUIs) for 2019 Novel Coronavirus (2019-nCoV)for specimen collection guidance.

Persons with laboratory-confirmed COVID-19 who have not had <u>any</u> symptoms may discontinue isolation when at least 7 days have passed since the date of their first positive COVID-19 diagnostic test and have had no subsequent illness provided they remain asymptomatic. For 3 days following discontinuation of isolation, these persons should continue to limit contact (stay 6 feet away from others) and limit potential of dispersal of respiratory secretions by wearing a covering for their nose and mouth whenever they are in settings where other persons are present. In community settings, this covering may be a barrier mask, such as a bandana, scarf, or cloth mask. The covering does not refer to a medical mask or respirator.

(5)

Mitigate Healthcare Personnel Staffing Shortages

- Maintaining appropriate staffing in healthcare facilities is essential to providing a safe work environment for healthcare personnel (HCP) and safe patient care.

- As the COVID-19 pandemic progresses, staffing shortages will likely occur due to HCP exposures, illness, or need to care for family members at home.

- Healthcare facilities must be prepared for potential staffing shortages and have plans and processes in place to mitigate them, *including considerations for permitting HCP to return to work without meeting all return to work criteria above*. Refer to the *Strategies to Mitigate Healthcare Personnel Staffing Shortages* document for information.

New guidance adds 10 days of time for return to work

- **HCP with laboratory-confirmed COVID-19 who have not had any symptoms** should be excluded from work until 10 days have passed since the date of their first positive COVID-19 diagnostic test assuming they have not subsequently developed symptoms since their positive test.

HCP Work Practices

After returning to work, HCP should:

- Wear a facemask for source control at all times while in the healthcare facility until all symptoms are completely resolved or until 14 days after illness onset, whichever is longer.

- **A facemask instead of a cloth face covering should be used by these HCP for source control during this time period while in the facility.**

- After this time period, these HCP should revert to their facility policy regarding universal source control during the pandemic.
  - A facemask for source control does not replace the need to wear an N95 or higher-level respirator (or other recommended PPE) when indicated, including when caring for patients with suspected or confirmed COVID-19.
  - Of note, N95 or other respirators with an exhaust valve might not provide source control.

- **Be restricted from contact with severely immunocompromised patients (e.g., transplant, hematology-oncology) until 14 days after illness onset**

- Self-monitor for symptoms, and seek re-evaluation from occupational health if respiratory symptoms recur or worsen

How do I access….

I have staffing needs
https://www.coronavirus.in.gov/2516.htm

I need testing for clients
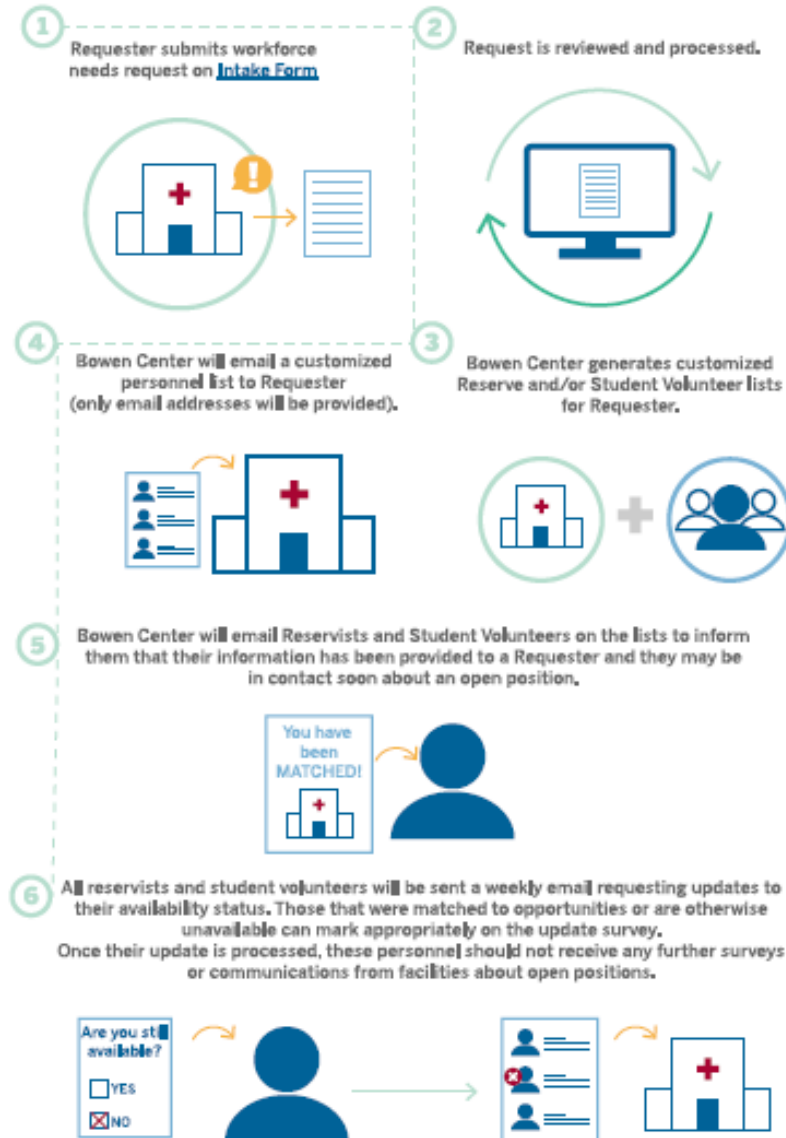striketeamrequest@isdh.in.gov

I need PPE for staff
isdhdeplogistics@isdh.in.gov

I have a client who is sick and being cared for in the home
https://www.coronavirus.in.gov/files/IN_COVID-19_Home_Care_4.20.20.pdf

Process for Connecting Healthcare Reservist and Student Workforce to Requester

1 Requester submits workforce needs request on **Intake Form.**

2 Request is reviewed and processed.

4 Bowen Center will email a customized personnel list to Requester (only email addresses will be provided).

3 Bowen Center generates customized Reserve and/or Student Volunteer lists for Requester.

5 Bowen Center will email Reservists and Student Volunteers on the lists to inform them that their information has been provided to a Requester and they may be in contact soon about an open position.

You have been MATCHED!

6 All reservists and student volunteers will be sent a weekly email requesting updates to their availability status. Those that were matched to opportunities or are otherwise unavailable can mark appropriately on the update survey.
Once their update is processed, these personnel should not receive any further surveys or communications from facilities about open positions.

Are you still available?
☐ YES
☒ NO

PPE Request

REQUEST PROCESS

- LTCFs should first contact their LHD to obtain needed PPE (masks, gloves, gowns, eye protection)
- If the LHD does not have supplies to meet the request, or the LHD is unreachable, LTCFs should complete a ICS 213 RR form (sample below) following the guidance outlined and email to isdhdeplogistics@isdh.in.gov.
- **Submitted requests should be filled out based on a facility's need for a 72-hour supply. ISDH can only fill a request once a facility's current stock reaches 72 hours or fewer.**

Fill out the following boxes with the required information:

- **Box 1**: COVID-19
- **Box 2**: Date of Request
- **Box 3**: Leave blank
- **Box 4**:
    - Quantity, kind, type of PPE
    - Detailed Item: specific description of item, including company names, if applicable, sizes. **Please note that each size should be a different line item**.
    - Requested Arrival Date and Time for supply request. **Please note that a requested date/time is not a guarantee.** Leave estimated and cost columns blank.
- **Box 5**: Physical address location for delivery and a contact number for the location. Must include a contact name and contact number.
- **Box 6**: Leave blank
- **Box 7**: Requester's name and contact number
- **Box 8**: Leave blank. All COVID-19 requests are considered priority at this time.
- **Box 13**: Leave blank
- Email completed form to isdhdeplogistics@isdh.in.gov
- The ISDH Operations Center will process and review requests against current available supply and in coordination with LHDs.

ICS 213 RR Form
https://www.coronavirus.in.gov/files/213RR.pdf

RESOURCE REQUEST MESSAGE (ICS 213 RR)

1. Incident Name:	2. Date/Time	3. Resource Request Number:

Requestor

4. Order (Use additional forms when requesting different resource sources of supply.):

Qty.	Kind	Type	Detailed Item Description: (Vital characteristics, brand, specs, experience, size, etc.)	Arrival Date and Time		Cost
				Requested	Estimated	

5. Requested Delivery/Reporting Location:

6. Suitable Substitutes and/or Suggested Sources:

7. Requested by Name/Position:	8. Priority: ☐ Urgent ☐ Routine ☐ Low	9. Section Chief Approval:

Logistics

10. Logistics Order Number:	11. Supplier Phone/Fax/Email:
12. Name of Supplier/POC:	

13. Notes:

14. Approval Signature of Auth Logistics Rep:	15. Date/Time:

16. Order placed by (check box): ☐ SPUL ☐ PROC

Finance

17. Reply/Comments from Finance:

18. Finance Section Signature:	19. Date/Time:

ICS 213 RR, Page 1

Key Concepts in This Guidance

- **Reduce facility risk.** Cancel elective procedures, use telemedicine when possible, limit points of entry and manage visitors, screen everyone entering the facility for COVID-19 symptoms, implement source control for everyone entering the facility, regardless of symptoms.

- **Isolate symptomatic patients as soon as possible.** Set up separate, well-ventilated triage areas, place patients with suspected or confirmed COVID-19 in private rooms with the door closed and with private bathrooms (as possible). Reserve AIIRs for patients with COVID-19 undergoing aerosol generating procedures and for care of patients with pathogens transmitted by the airborne route (e.g., tuberculosis, measles, varicella).

- **Protect healthcare personnel.** Emphasize hand hygiene, provide barriers to limit contact with patients at triage, cohort patients with COVID-19, limit the numbers of staff providing their care, prioritize respirators for aerosol generating procedures.

Circle the Wagons

- **Visitor Restrictions** No one should be visiting or in your home unless they live there.

- **Mask** all individuals that are ill and distance away from the rest of the home or occupants immediately.

- **Screen** for fever and symptoms after returning from home visits, change of clothing upon return to your home, disinfection of car seat and shared toys or items travelling between homes.
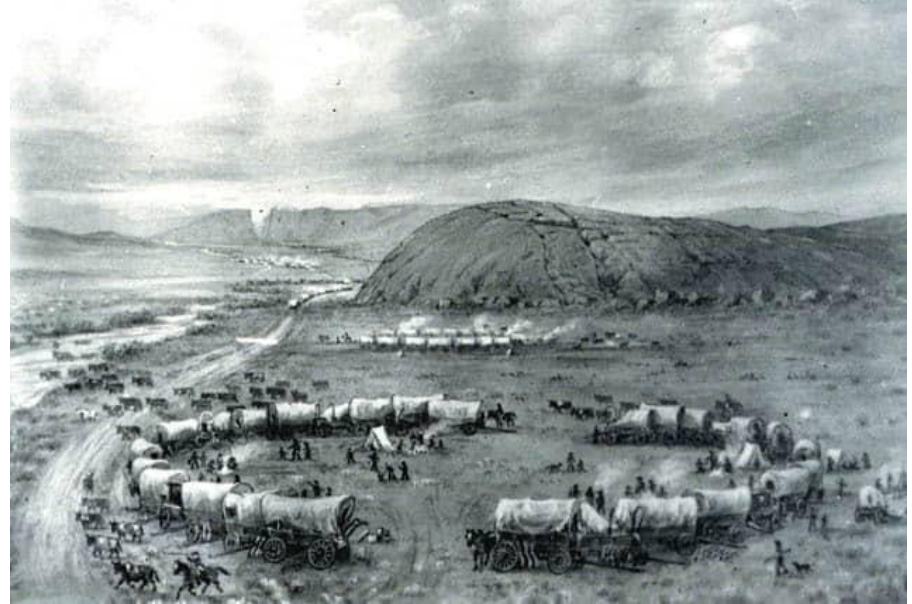

Look for prote**ct**ion, get **defensive**, get ready for an attack; from the old west where the **pioneers** would circle their **wagons** for protection.

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The Bottom line

- Keep washing your hands!
- Use 60% or higher hand sanitizer
- Do not touch your T zone- nose, face, mouth
- Dust off the bleach wipes
- Open a window to let in the spring air.

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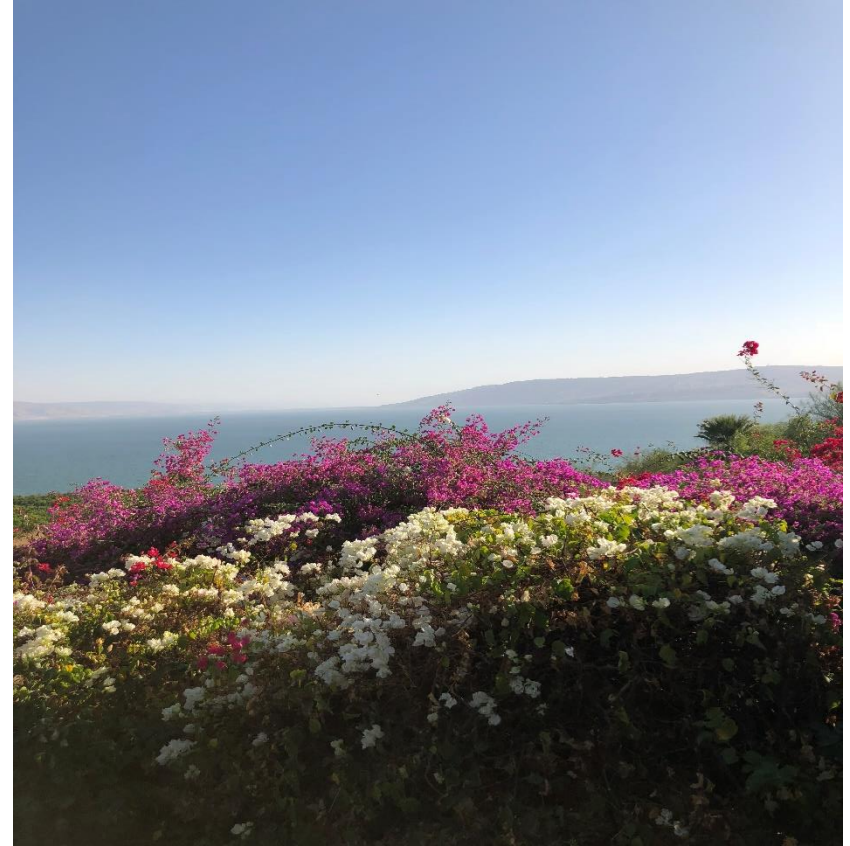
Contact Information

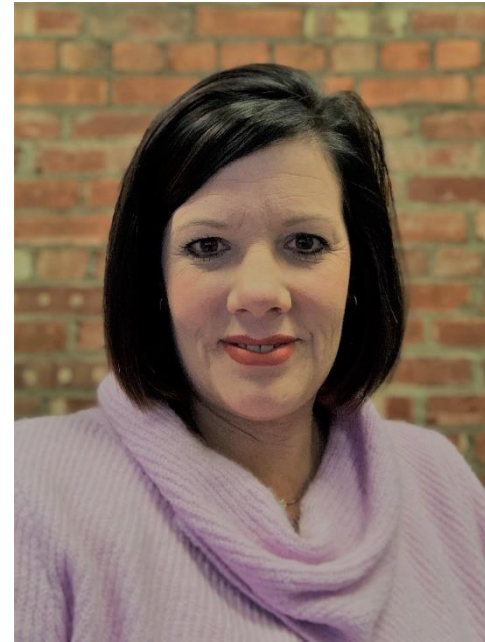**Deanna Paddack, BSN RN,**

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Indiana State
Department of Health

References

(1) – CDC.gov/Coronavirus

(2) – Coronavirus.in.gov

(4)https://www.cdc.gov/coronavirus/2019-ncov/hcp/infection-control-recommendations.html#infection_control

(5) https://www.cdc.gov/coronavirus/2019-ncov/hcp/disposition-in-home-patients.html

Policy Guidance Updates: COVID-19 Reporting

- ISDH Issued an Order Requiring COVID-19 Reporting for individuals in congregate residential settings, effective 04/10/20

- Impacts BDDS supported congregate residential settings, including:
  - HCBS Waiver settings serving two or more individuals
  - Community Residential Facilities for individuals with I/DD (ICFs/IDD and SGL)

- Requires the following to be reported within 24 hours:
  - Any resident who tests positive for COVID-19;
  - Any employee who tests positive for COVID-19;
  - Any confirmed positive COVID-19 related death OR suspected COVID-19 related death of a resident
  - Any confirmed positive COVID-19 related death OR suspected COVID-19 related death of an employee

Policy Guidance Updates: COVID-19 Reporting

- Reporting Changes Effective 04/21/20:
  - Process for reporting information for individuals
    - Report through BDDS's Incident Management System
    - The IR should include the information you are normally required to report, PLUS the following information included in the *narrative* of the incident report:
      - Total number of individuals living in the home.
      - Total number of staff working in the individual's home.
      - Did the individual have any symptoms during their illness? (Yes, No, Unknown)
      - Did the individual have a chest x-ray? (Yes, No, Unknown)
      - What type of specimens were collected, if known? (e.g. NP Swab, OP Swab, Sputum, Other)
      - For confirmed positive cases, what was the date the COVID-19 specimen was collected, if known?
      - What was the symptom resolution date?
        » If symptoms have not resolved, indicate such.
      - Was/is the patient hospitalized for this illness? (Yes, No, Unknown)

Policy Guidance Updates: COVID-19 Reporting

- Reporting Changes Effective 04/21/20:
  - Process for reporting information for staff
    - Report through online COVID-19 Employee Reporting Form
    - Provider Information
      - Reporting provider's name, address, county, phone number, and email address.
      - Employee first name, last name, date of birth, sex, race, and ethnicity.
      - Settings where employee worked (waiver, SGL).
        » If the employee worked in multiple residential settings, provide additional information at the end of the reporting form.
      - Address and county where employee worked.
        » If the employee worked in multiple residential settings, provide additional information at the end of the reporting form.
      - Total number of individuals at work location.
        » If the employee worked in multiple residential settings, provide additional information at the end of the reporting form.
      - Total number of staff at work location.
        » If the employee worked in multiple residential settings, provide additional information at the end of the reporting form.

Policy Guidance Updates: COVID-19 Reporting

- Reporting Changes Effective 04/21/20:
  - Process for reporting information for staff (cont.)
    - Report through [online COVID-19 Employee Reporting Form](#)
    - Employee COVID-19 information
      - Did the employee have symptoms during their illness? (Yes, No, Unknown)
      - Did the employee have a chest x-ray? (Yes, No, Unknown)
      - What type of specimens were collected, if known? (e.g. NP Swab, OP Swab, Sputum, Other)
      - For confirmed positive cases, what was the date the COVID-19 specimen was collected, if known?
      - What was the symptom resolution date?
        - If symptoms have not resolved, indicate such.
      - Was the employee hospitalized for this illness? (Yes, No, Unknown)
      - Did this employee die? (Yes, No, Unknown)

- BDDS / BQIS Questions:
  BQIS.Help@fssa.in.gov